



The Rag Place, Inc.  
13160 Raymer Street  
North Hollywood, CA 91605  
818.765.3338 • FAX: 818.765.3860  
www.theragplace.com

## CREDIT CARD AUTHORIZATION REQUEST

Name on Credit Card: \_\_\_\_\_

Credit Card Type and Issuing Bank: \_\_\_\_\_

Card No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Verification Code\*: \_\_\_\_\_

\*Amex Card: This is the 4 digit number on the front side of the card above the account number.

\*Visa and MasterCard: This is the last 3 digits on the signature strip on the reverse side of card.

I HEREBY AUTHORIZE THE RAG PLACE, INC., TO AUTHORIZE THE ABOVE CREDIT CARD FOR FULL PAYMENT OF ALL CUSTOMER ORDERS PLACED BY ME AND/OR MY COMPANY. WHEN SIGNED, THIS DOCUMENT WILL SERVE AS "SIGNATURE ON FILE" FOR ALL CUSTOMER ORDERS IN MY NAME AND/OR IN THE NAME OF MY COMPANY.

THIS AGREEMENT MAY BE TERMINATED BY EITHER PARTY WITHIN 30 DAYS WRITTEN NOTICE OR UPON THE EXPIRATION DATE OF THE CREDIT CARD, WHICHEVER OCCURS FIRST. ANY OUTSTANDING BALANCE OWED CAN AND WILL BE CHARGED TO MY CREDIT CARD. IN THE EVENT NO FURTHER CHARGES CAN BE PROCESSED ON MY CREDIT CARD, FOR ANY REASON, I AGREE TO BE PERSONALLY RESPONSIBLE TO PAY THOSE CHARGES TO THE RAG PLACE, INC., UPON DEMAND.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State & Expiration: \_\_\_\_\_